

Tab D Letters from corneal surgeons

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STRITCH SCHOOL OF MEDICINE Department of Ophthalmology

May 7, 2001

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Jay I. Perlman, M.D., Ph.D. Ophthalmic Pathology

Peter A. Russo, O.D. Contact Lenses

R. Tracy Williams, O.D.

Richard D. Zak, M.D. Retina and Vitreous Office of the Commissioner of Food and Drug Administration 5630 Fishers Lane Rockville, MD 20852

Dear Sirs:

Last year, calendar 2000, I performed 25 corneal transplants. All of these procedures were performed in an outpatient surgery center.

Sincerely,

Charles Bouchard, M.D.

Mais Bouland

Director, Cornea Service

Cornea, Anterior Segment &

Keratorefractive Surgery

John H. Wilkins, M.D.

Chris Johnson, Ph.D.

Glaucoma

Mark A. Terry, M.D., P.C.

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Office of the Commissioner Food and Drug Administration 5630 Fishers Lane Rockville, MD 20852

May 4, 2001

RE: Corneal Transplantation as an Out Patient Procedure

Dear Sir/Madam:

It has come to my attention that the FDA believes that the procedure of corneal transplantation surgery requires an inpatient stay in the hospital.

This is to inform you that I performed over 70 conteal transplants last year, and not a single surgery was done on an inpatient basis. Nearly all patients had only a 4 to 5 hour stay in the outpatient surgery suite before returning home after surgery, with each patient being seen in my office the next morning for their first follow-up visit. The few patients that did stay overnight after corneal transplantation surgery did so for other systemic illness complaints.

If you have any questions on this issue, please do not hesitate to contact me.

Sincercly,

Mark A. Terry, M.D.

Director, Corneal Services
Devers Eye Institute

Ce: Carrie Kovar
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Joel Sugar, MD Professor Director, Corneal Service

April 19, 2001

Barbara Crow, Chair EBAA 1010 Northwest 22nd Ave. Portland, Oregon 97210

Dear Barbara:

After reviewing the FDA "Proposed New Rules for Good Tissue Practice", it is evident that they misinterpret the indications for repeat keratoplasty. Primary donor failure is indeed an extremely uncommon reason for repeat corneal transplants. The majority of repeat transplants are done because of rejection failures, endothelial failure, or recurrence of disease in the transplant. Present tissue practices have protected our patients so that the need to repeat corneal transplant because of primary donor failure accounts for well below 1% of corneal transplants. I hope that in the new wording that you propose for changes in the FDA guidelines this point is emphasized.

For oour eye bank (MEBTC) for fiscal year 200, there wee 5 primary donor failures in 2795 grafts or 0.18%.

Sincerely,

Voel Sugar, MD Professor

JS/rj

Cc: Pat Aiken-O'Neill